Sample Budget Instructions

We encourage you to use this sample budget template. If you choose not to use this format, please ensure that your format is easy to use and provides information in the same general categories. Regardless of the format, please also include a budget narrative with your proposal (no template is provided for the narrative).

If you are using this document to create your budget, please read the important information below to ensure you can fully navigate the sample budget. If you have questions once you review this guidance, you may also contact the program officer responsible for this competition.

IMPORTANT INFORMATION ABOUT THIS DOCUMENT

- 1) There are five worksheets in this sample budget document: (1) Sample Budget Instructions (this worksheet); (2) Total Cost by Grant Category; (3) Summary Budget; (4) Admin Detailed Budget and (5) Program Detailed Budget. You can navigate between these worksheets by clicking on the tabs near the bottom of the document. We do not provide a template for the requested budget narrative.
- 2) In order to share information about the budget recommendations and requirements, we have created comments. Comments appear as boxes with a yellow background on your screen. There is an arrow from the comment to the cell that it is associated with. Each cell with a comment also has a small red triangle on the upper right hand corner of the cell. Currently all comments should be shown. Once you have reviewed all of the comments, you may wish to hide them. To hide all comments, select the "Review" menu at the top of the screen. There you should see a button that says "Show All Comments" which you can unselect to hide all the comments and select again to make all the comments reappear. If you do not have this button or menu option, use the software's help feature to find out where this feature is on your version of the software. You are also able to view individual comments by hovering your mouse over the cell that has the comment you wish to review. Please be sure to review all of the comments as they contain important information about the budget.
- 3) You may add and delete lines anywhere in the Detailed Budgets depending on your needs. Please ensure that you explain all of your budget details clearly and concisely in your budget narrative, particularly if you have made budgeting decisions that depart from the suggestions in the NOFO or POGI.

4) Some cells are set up to auto calculate based on values that you fill in. For example, once you fill in the amount of staff member #1's salary covered by the grant (in the Requested Federal Funds column) and the amount covered by cost-share (in the Cost-Share by Applicant column), the Program Total column will automatically add those two values together. You can tell which cells will automatically fill in because they have a \$ in them before you enter anything in the spreadsheet.

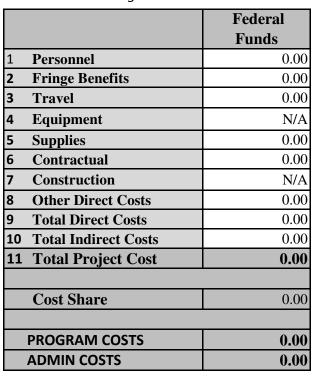
While we have done our best to ensure that this auto fill feature is useful and accurate, it is your responsibility to check the math to ensure that the calculations are accurate and account for all line items in your budget.

- 5) The Summary Budget also has auto fill features both for the Year One budget (which is drawn from your entries on the Detailed Budget worksheet) and for the per participant costs. For the per participant costs to calculate, you will need to fill in the number of participants in the rose colored boxes. The number of participants remains the same each year and is specified in the NOFO and POGI. As with the detailed budget, it is your responsibility to check the math and ensure these automatic calculations are correct.
- 6) You are required to give estimated budget numbers for the non-competitive continuation years in the Summary Budget. Please do not provide the detailed budget for these estimates at this time. If ECA decides to exercise a non-competitive continuation, a detailed budget will be requested at that time.
- 7) Tab 2 Total Cost by Grant Category will autofill based upon the information from Tab 4 Admin Detailed Budget and Tab 5 Program Detailed Budget.

▲ Enter Institute Theme

Total Cost by Grant Category Study of the U.S. Insitute

Organization Name
Project Title
Budget Duration



^{*} line item amounts auto-fill from "Admin and Program Detailed Budget Template" tabs

		Ir	the U.S. Institute nsert Title		
			mary Budget Applicant Name		
Period		Description	Funds Requested from ECA	Cost Share Funds	Total Costs
Year One	Participants		pants in this cell to auto calcul Two, Three and a Summary T		icipant.
	Administrative	Costs			0
	Program Costs				0
	Total Costs		0	0	0
		Costs Per Participant Per Participant		0	0
	Total Costs Per	r Participant	0	0	0
Year Two I	Estimates Participants				
	Administrative	Costs			0
	Program Costs				0
	Total Costs		0	0	0
		Costs Per Participant Per Participant		0	0
	Total Costs Per	r Participant	0	0	0
Year Three	e Estimates Participants				
	Administrative	Costs			0
	Program Costs				0
	Total Costs		0	0	0
		Costs Per Participant Per Participant		0	0
	Total Costs Per	r Participant	0	0	0
Total Thre	e Year Estimated				
	Administrative				0
	Program Costs Total Costs		0	0	0
	Total Costs		0		
		Costs Per Participant Per Participant			0
	Total Costs Per		0	0	0

Enter Institute Theme

LINE ITEM BUDGET ADMINISTRATIVE COSTS

Organization's Name Project Title

Budget Duration (i.e. October 1, 2017 - September 30, 2018)

ADMINISTRATIVE COSTS

Administrative costs include staff, direct, and indirect expenses. Please see NOFO

gram costs. quested Funds folumn N will match Column I.

Enter Institute Theme

		Unit Cost				FY18	FY18	FY18 Cost-		Section F.2
		Unit	Numb	Amount	Rate	Program Total	Requested Federal Funds	Share by Applicant	FY18 Program Total	Please Note: Column I will be the total progra Columns K and L will identify the Federal Requ
1	Personnel	Month/Annu al	_	salary rate	% effort	•				and Cost-Share by Applicant, respectively. Colu indicate the total program costs and should ma
1.1	Staff 1 Name/Title					\$ -			\$ -	This will serve as a mathematical check.
1.2	Staff 2 Name/Title.					\$ -			\$ -	
1.3	Staff 3 Name/Title					\$ -			\$ -	
		Subtotal Personnel \$ -					\$ -	\$ -	\$ -	
2	Fringe Benefits			fringe base	rate				_	
2.1	Staff 1 Name/Title					\$ -			\$ -	5. Supplies are tangible property. Please see 2 CFR 200.94 for full
2.2	Staff 2 Name/Title					\$			\$ -	definition. List separately and provide a description of supplies here and in
2.4	Staff 3 Name/Title					\$ -			\$ -	budget narrative.
			Sub	total Fringe	Benefits	\$ -	\$ -	\$ -	\$ -	
5	Supplies (< \$5,000 per unit)		# units	unit co	ost					
5.1	(description)					\$ -			\$ -	
				Subtotal	Supplies	\$ -	\$ -	\$ -	\$ -	
8	Other Direct Costs (ODC)	unit (each, # unit cost total, etc.) units								8. Typical costs include copying, printing, etc. not
8.1	(description)					\$ -			\$ -	included in Indirect Costs. Please refer to 2 CFR 200.413.
8.2	(description)					\$ -			\$ -	Trease relief to 2 error 2501 1251
			Subtota	al Other Dire	ect Costs	\$ -	\$ -	\$ -	\$ -	
9	Total Direct Costs						\$ -	\$ -	\$ -	
10	Total Indirect Costs (Indicate: NICRA Provisional, Final, Pre determined or 10% deminimus Rate based on MTDC)					\$ -			\$ -	
11	Total Administrative Cost	(must match	award a	imount)			\$ -	\$ -	\$ -	

LINE ITEM BUDGET PROGRAM COSTS
Organization's Name
Project Title
Budget Duration (i.e. October 1, 2017 - September 30, 2018)

			LINE		ganization's Name	COSTS				Enter Institute Theme	DO NOT DELETE THIS
		Budget	Duratio	n (i.e. C	Project Title October 1, 2017 - Sej	ptember 30, 20	18)				COLUMN or the Particpiant Support Cost formula will
PROG	GRAM COSTS Participant Unit Cost FY18						FY18 FY18 Cost- FY18			Please Note: Column I will be the total program costs. Columns K and L will identify the Federal	not work
		Support	Unit	#	Unit Cost	Program	Requested	Share by	Program	Requested Funds and Cost-Share by Applicant, respectively. Column N will indicate the total program	
		Costs? (Y/N)	Type unit	units #		Total	Federal Funds	Applicant	Total	costs and should match Column I. This will serve as a mathematical check.	Yes
3	Travel		(trips, days)	units	cost					Participant Support Cost? (Y/N):	<u> </u>
3.1 3.1.1	DC Briefing Travel Lodging (specify location)			1		lś -			\$ -	Please indicate Yes (Y) or No (N) in Column D to spe is classified as a participant support cost as defined i	cify whether each item
3.1.2	Meals and Incidentals (specify					\$			\$ -	is classified as a participant support cost as defined i	12 CFR 200.75.
3.1.3	location) Transportation (specify type					s -			\$ -		
	and location)			Subto	tal DC Briefing Travel	\$ -	\$	\$	ş -		
3.2	Guest Speakers Travel Guest Speaker 1 (name)									2. In the description and/or in the Dudget Newstries of	
3.2.1a	Lodging (specify location) Meals and Incidentals (specify					\$ -			\$ -	3. In the description and/or in the Budget Narrative, pl travel's purpose, rates, the locations of each trip, the d	luration of the trip, and the
3.2.2a	location)					\$			\$ -	number of travelers. For transportation, list the mode of (lodging, meals, incidental) costs should not exceed property and the state of the state o	
3.2.3a	Transportation (specify type and location)					\$ -			\$ -	Rates may be found at http://www.gsa.gov/perdiem.	
	Guest Speaker 2 (name)			Subt	otal Guest Speaker 1	\$ -	\$	× .	\$ -		
3.2.1b	Lodging (specify location) Meals and Incidentals (specify					\$ -			\$ -		
3.2.2b	location)					\$ -			\$ -		
3.2.3b	Transportation (specify type and location)					\$ -			\$ -	3.1 Recipients must attend a briefing at the State	1
				Subtot	otal Guest Speaker 2 al All Guest Speakers	\$ -	\$	\$ - \$ -	\$ - \$ -	Department, tentatively scheduled for April 2018. Generally, the Academic and	
3.3	Participant Study Tour (list each city separately)									Administrative Directors should both attend.	1
	Study Tour Location 1			$\overline{}$		ı					
3.3.1a	Lodging (specify location 1)					\$			\$ -		
3.3.2a	Meals and Incidentals (specify location 1)					\$ -			\$ -		
3.3.3a	Transportation (specify type and location 1)					\$ -			\$	3.3 In order to keep costs down, organziers may wish	to house
			Su	ubtotal S	tudy Tour Location 1	\$ -	\$	\$ -	\$ -	two participants in each room for the study tour.	to node
3.3.1b	Study Tour Location 2 Lodging (specify location 2)					\$ -			\$ -		
	Meals and Incidentals (specify					\$ -			\$ -		
3.3.2b	location 2) Transportation (specify type										
3.3.3.b	and location 2)			ubtotal 9	Study Tour Location 2	\$ -	ć	ć	\$ -		
			Subt	otal Stu	dy Tour- all locations	\$ -	\$	\$ - \$ -	\$ - \$ -		
3.4	University Staff Escort Travel										
	Staff Escort Location 1		1			1.					
-	Lodging (specify location 1) Meals and Incidentals (specify					\$ -			\$ -		
3.4.2a	location 1)					\$ -			\$ -		
3.4.3a	Transportation (specify type and location 1)					\$ -			\$ -		
	Staff Escort Location 2		<u>Su</u>	btotal S	taff Escort Location 1	\$ -	\$	\$ -	\$ -		
3.4.1b	Lodging (specify location 2)					\$ -			\$ -		
3.4.2b	Meals and Incidentals (specify					\$ -			\$ -		
3.4.3b	location 2) Transportation (specify type					s -			\$ -		
	and location 2)		Su	btotal S	taff Escort Location 2	\$ -	\$	\$ -	\$ -		
			Subto	tal Staff	Escorts- all locations Subtotal Travel	\$ -	\$ -	\$ - \$ -	\$ - \$ -		
4	Equipment (> \$5,000 per unit				Not Allowable			7			
5	Supplies (< \$5,000 per unit)	_		#	unit cost						
5.1	(description)		<u> </u>	units		\$ -	L		\$ -		
			unit	_	Subtotal Supplies	\$ -	\$ -	\$ -	\$ -		
6	Contractual (Subawards, Consultant fees)		(sub,	# units	unit cost						
	Contractual Sub-Awardee		ant)	units							
6.1	(name or description)					\$ -			\$ -		
6.2	Contractual Sub-Awardee (name or description)					\$ -			\$ -		
7	Construction				Subtotal Contractual Not Allowable	\$ -	\$ -	\$ -	\$.		
8	Other Direct Costs (ODC)		unit	#	unit cost					Supplies are tangible property. Please see 2 CFR 200 definition. List separately and provide a description of s	.94 for full upplies here
	General Program Costs			units						and in budget narrative.	
8.1	Honoraria (for speakers) List separately	•	_		_						
8.1.1 8.1.2	Speaker 1 Speaker 2			\setminus		\$ -			\$ - \$ -		
					Subtotal Honoraria	\$	\$	\$ -	\$ -		
8.2	Educational Materials (e.g. film, video)								L		
8.2.1 8.2.2	Material 1 Material 2					\$ - \$ -			\$.		
8.3	Web Hosting		<u>Su</u>	ibtotal E	ducational Materials	\$ -	\$	\$	\$ -	General Program Costs: Costs that do not vary by nu	mber of participants.
8.4	Farewell/Welcome Event 1					\$.			\$	0.1 Forest for social size.	
				 						8.1 Except for special circumstances, honoraria for spea complensated on a salaried basis should not exceed \$25	0/day, per speaker. Special
8.5	Farewell/Welcome Event 2					\$ -			\$ - \$ -	circumstances should be explained in the budget narrati approval.	ve and are subject to ECA
8.6	Follow-on Activities Ground Transportation		<u> </u>		1	<u> </u>			,		
8.7	(specify type- bus rental, van, etc) List separately									9.3 Film and video rootals advantaged and and	they curricular people for
8.7.1	Ground Transportation 1					\$ -			\$ -	8.2 Film and video rentals, educational materials, and of the program. List materials separately on each line. Note: This section is for costs that do not vary by num.	

Enter Institute Theme

Per Participant Program Costs 8. Academic Residency Costs 8. 1. Academic Residency - loging 8. 2. Academic Residency - meals 8. 3. Academic Residency - Personal 8. 3. Academic Residency - Personal 8. 4. Academic Residency - Personal 8. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5.										
Per Participant Program Costs 3. Academic Residency Costs 8.1 Academic Residency - Indiging 8.2 Academic Residency - Personal Needs Allowance Subtotal Required Institute Textbooks A Material 1 9.2 Material 1 9.2 Material 2 Subtotal Required Institute Textbooks & Materials 1.0 Communications 1.0 Cell phones 1.0 Cell phones service Subtotal Required Institute Textbooks & Materials Subtotal Communications Subtotal Communications Subtotal Communications Subtotal Communications Subtotal Participant Admissions Subtotal Contingency Subtotal Other Direct Costs Subtotal Required Institute Textbooks	3.7.2	Ground Transportation 2								\$
Academic Residency Costs S		<u> </u>		Sub	total Gr	ound Transportation	s -	\$	- \$ ·	35
8.1 Academic Residency - lodging		Per Participant Program Costs								
Section Sect	3.8	Academic Residency Costs		_						$\overline{}$
8.3 Academic Residency - Personal Reeds Allowance Subtotal Academic Residency \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$.8.1					_	\$ -			\$
8.3 Academic Residency - Personal Reeds Allowance Subtotal Academic Residency \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	8.2	Academic Residency - meals					ς -			ς.
Section Sect	.0.2		<u>L</u>			_	Ž.			\succeq
Subjotal Academic Residency S S S S S S S S S	3.8.3						\$			\$
9. Material 1				<u>_s</u>	ubtotal	Academic Residency	\$ -	\$	- \$ ·	\$
Material 1	3.9								/	
Subtotal Required Institute Textbooks & Materials S S S S S S S S S	9.1		$\overline{}$				LĠ -			\$
Subtotal Required Institute Textbooks & Materials \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$			+	_	_		1			
10.1 Cell phones service	.3.2	Witches 2	Subtotal Requ	uired Inst	itute Te	extbooks & Materials		55	, \$ ·	
10.1 Cell phones service	3.10	Communications					$\overline{}$			
1.0.2 Cell phone service	3.10.1						\$.			\$
Subtotal Communications S	3.10.2			/			\$ -			\$
1.1 Books Allowance					Subt	otal Communications	\$ -	\$	- \$	
1.2 Cultural Allowance	3.11	Books Allowance							/	
33 Participant Admissions	3.12									
13.1 Admission 1	3.13		$\overline{}$	_	$\overline{}$					1
3.2 Admission 2 Subtotal Partitional Admissions S S S S S S S S S	3.13.1		$\overline{}$			_	Ś -	/		Ś
Farewell Materials (certificates, etc) List separately 1.4.1 Farewell Material 1 1.4.2 Farewell Material 2 1.5 Mailing 1.6 Tax Withholding 1.7 Reasonable Accomodation Contingency 1.8 Medical Contingency Subtotal Other Direct Costs Total Indirect Costs (Indicate: NICRA Provisional, Final, Pre O determined or 10% deminimus Rate based on MTDC)	.13.2				/		Ś -			Ś
Forewell Materials 1.4 (certificates, etc) List				Sub	total Pa	articipant Admissions		Ś	. 5	
separately 1.41. Farewell Material 1 1.42. Farewell Material 2 1.5 Mailing 1.6 Tox Withholding 1.7 Reasonable Accomodation Contingency 1.8 Medical Contingency Subtotal Office Direct Costs Total Indirect Costs (Indicate: NICRA Provisional, Final, Pre O determined or 10% deminimus Rate based on MTDC)		Farewell Materials			$\overline{}$	$\overline{}$				
separately 1.41. Farewell Material 1 1.42. Farewell Material 2 1.5 Mailing 1.6 Tox Withholding 1.7 Reasonable Accomodation Contingency 1.8 Medical Contingency Subtotal Office Direct Costs Total Indirect Costs (Indicate: NICRA Provisional, Final, Pre O determined or 10% deminimus Rate based on MTDC)	3.14	(certificates, etc) List						L		II
3.4.1 Sarewell Material 1 S S S S S S S S S										ll .
1.4.2 Farewell Material 2	3.14.1		1				5			Ś
Subtotal Farewell Materials \$ - \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$			1			_				
1.15 Mailing 1.16 Tax Withholding 1.17 Reasonable Accommodation 1.18 Medical Contingency 1.18 Medical Contingency 1.18 Subtotal Office Direct Costs 1.19 Subtotal Office Direct Costs 1.10 Subtotal Office Direct Costs 1.10 Subtotal Office Direct Costs 1.10 Subtotal Office Direct Costs 1.11 Subtotal Office Direct Costs 1.12 Subtotal Office Direct Costs 1.13 Subtotal Office Direct Costs 1.14 Subtotal Office Direct Costs 1.15 Subtotal Office Direct Costs 1.16 Subtotal Office Direct Costs 1.17 Subtotal Office Direct Costs 1.18 Subtotal Office Direct Costs 1.19 Subtotal Office Direct Costs 1.10 Subtotal Office Direct					Subtot	al Farewell Materials		5		
16 Tax Withholding 17 Reasonable Accommodation Contingency 18 Medical Contingency Subtotal Other Direct Costs Total Direct Costs (Indicate: NICRA Provisional, Final, Pre determined or 10% deminimus Rate based on MTDC)	15	Mailina	•					*	Ž.	
.17 Reasonable Accomodation Contingency .18 Medical Contingency .19 Subtotal Other Direct Costs .5 S S S S S S S S S S S S S S S S S S S			<u> </u>	1						
18 Medical Contingency 18 Medical Contingency 5 - 5 - 5 Total Direct Costs Total Indirect Costs (Indicate: NICRA Provisional, Final, Pre determined or 10% deminimus Rate based on MTDC)	.10		<u> </u>	_			· ·			ľ
Contingency Subtotal Other Direct Costs \$ - \$ - \$ - \$ 5 Total Direct Costs (Indicate: NICRA Provisional, Final, Pre 0 determined or 10% deminimus Rate based on MTDC)		Reasonable Accomodation		<u> </u>				_	1	` ـ اا
18 Medical Contingency \$ \$ \$ Total Direct Costs \$ \$ \$ \$ \$ \$ \$ \$ Total Indirect Costs (Indicate: NICRA Provisional, Final, Pre 0 determined or 10% deminimus Rate based on MTDC)	1/	Contingency		1 \	\		> -			\$
Subtotal Other Direct Costs \$ - \$ - \$ - \$ Total Direct Costs (Indicate: NICRA Provisional, Final, Pre 0 determined or 10% deminimus Rate based on MTDC)		<u> </u>	L	\setminus						Щ_
Total Direct Costs Total Indirect Costs (Indicate: NICRA Provisional, Final, Pre 0 determined or 10% deminimus Rate based on MTDC)	3.18	Medical Contingency					5 .			\$
Total Direct Costs Total Indirect Costs (Indicate: NICRA Provisional, Final, Pre 0 determined or 10% deminimus Rate based on MTDC)				$\overline{}$	Cubbad	al Other Diseast Coats	*	~	ć	·
Total Indirect Costs (Indicate: NICRA Provisional, Final, Pre determined or 10% deminimus Rate based on MTDC) \$ 5		T-1-1 D' 1 C1-			SUDTO	ai Other Direct Costs			7	_
NICRA Provisional, Final, Pre determined or 10% deminimus Rate based on MTDC) S S S S S S S S S S S S S		Total Direct Costs	NK.				, ~	*	12	\$
NICRA Provisional, Final, Pre determined or 10% deminimus Rate based on MTDC) S S S S S S S S S S S S S		Total Indirect Costs (Indicate:		I						#
0 determined or 10% deminimus Rate based on MTDC) \$ \$									_	∥ `
deminimus Rate based on MTDC)	0			\				l.		ااد
MTDC)	U			l 🔨			· ·			П,
				l '	\					`
Tables Car		MTDC)			_			_ \	Į.	ll
1 Tatal Danson Cart (must match annual control										
	1	Total Program Cost		(must m	atch av	rard amount)	\$ -	5	· s ·	ć

3.2 Film and video rentals, educational materials, and other curricular ner the program. List materials separately on each line. Note: This section is for costs that do not vary by number of partipants.

8.3 Costs associated with publishing the institute website- not to include salary for the webmaster which should be accounted for in Personnel or

8.4 and 8.5 Two events per Institute, max \$45/person with a with a 2-1 ratio of guests to participants, are allowable for direct U.S. government support. Note cost/participant and # of participants.

8.6 We suggest you budget up to \$5000 of ECA funds for this line item, pe Institute. The budget narrative should explain planned use of funds while retaining maximum flexibility by indicating that the funds will be used "for activities including, but not limited to" your planned activities.

Per Participant Program Costs: Costs that vary by number of participants. Clearly indicate # of participants in budget.

8.8.3 Where feasible, each participant should receive the maximum U.S. government established allowance incidental expenses for each location throughout the program for the "Personal Needs Allowance".

8.9 Use this line item for required readings, etc. Please list each item seprately. Note # of participants.

8.10.1 Each participant should be provided with a cell phone and domestic cell phone service throughout the program. Hosts should also arrange for participants to have a way to call home upon arrival at the Institute to let their families know they have arrived safely.

8.11 Participants should receive \$200 each to purchase U.S. studies books and materials in their area of interest. These funds are not to be used to cover <u>mandatory organs activities or materials</u>.

8.12 Participants should receive \$200 each. These funds can be used to cover admissions to cultural events of personal interest. These funds are not to be used to cover mandatory program activities or materials.

8.13 Use this line item for cultural activities planned for the group as part of the institute program, either during the academic residency or the study tour. List each

8.15 OPTIONAL: In the event the recipient institution chooses to mail materials to the participants. Maximum \$200 per participant to cover costs of shipping program related books and materials.

8.16 Some, but not all, organizations require taxes to be withheld on funds provided to participants. If your organization requires this, please include this line item. Pleas note: All of the amounts listed in the other line items should be the totals after any applicable taxes have been withheld. Please offer details on any withholdings in your budget narrative.

8.17 For disability and other reasonable accommodations. should allocate approximately \$2,000 per Institute.

8.18 OPTIONAL:In addition to ASPE health benefits provided by DOS, the recipient may want to budget for miscellaneous medical contingency costs such as co-pays or other medical costs not covered by ASPE.

10. Please make note of the following in the Budget Narrative:

• If you do not have an established indirect cost rate agreement, please list what costs are excluded when calculating the Modified Total Direct Costs (MTDC) base in accordance with 2 CFR 200.68 and 2 CFR 200.414.

• Please list the participant support costs in your budget narrative. Please state if the above two questions are part of your existing policies and if they are consistently applied in all budgets throughout your organization.